

Standard Plan

Administered by Blue Cross & Blue Shield United of Wisconsin



BlueCross & BlueShield United of Wisconsin

An independent license of the Blue Cross and Blue Shield Association

What we are

A comprehensive health plan that provides you with complete freedom of choice among hospitals and physicians.

It is administered by Blue Cross & Blue Shield United of Wisconsin – a local company known for its service, convenience, automated processing, and the I.D. card that is recognized and accepted across the nation and around the world.

Where we are

In addition to our corporate headquarters located in Milwaukee, we have three service centers. We can answer questions about claims or benefits in our offices, by letter, by e-mail or by telephone. To provide more convenient service, walk-in customer service is available at each service center.

bluecrosswisconsin.com: An interactive Site for Active People

Service Direct

With our exclusive Service Direct feature, you can obtain customer service through our web site 24 hours-a-day, 7 days-a-week. Click on the NEED CUSTOMER SERVICE? button and you can:

- Check on claim status
- Order new ID cards
- Check on eligibility & benefits
- E-mail Customer Service

Online Provider Directories

- You can create instant, customized listings by simply clicking on Find A Provider under NEED CUSTOMER SERVICE?. You can search for a physician based on your

personal criteria, or you can print your plan's complete directory.

Quality Initiatives

- Effective January 1, 2004, Blue Cross and Blue Shield United of Wisconsin will be implementing a higher processing standard for written inquiries. It is our goal that 100% of written inquiries be resolved within an average of 12 working days.

Exclusions and limitations

- Physical exams requested by third parties (i.e., school, insurance, etc.)
- Services or supplies for custodial care or rest cures as defined by the contract
- Cosmetic surgery
- Services, supplies or equipment that are not medically necessary, or which are experimental/investigational
- Eyeglasses, contact lenses or hearing aids or examinations for their prescription or fitting
- In vitro fertilization or artificial insemination
- Weight loss programs, services or supplies
- Dental services except as specifically provided
- Organ transplants except as specifically provided
- Reversals of sterilization
- Care covered by worker's compensation

Covered Services – no deductible:

- Hospital services
- Maternity care
- Extended care facility (except custodial)
- Surgery
- X-ray and laboratory services

Covered Services – at 80 percent after deductible:

- Office calls
- Routine physical exams
- Physical, speech, and occupational therapy when necessitated by illness
- Extraction and/or replacement of natural teeth when necessitated by an accidental injury

This is intended as a general outline of benefits. It is not intended to be a complete description of coverage and does not serve as a legal document. For a complete listing of benefits, limitations, and exclusions please refer to the Benefit Handbook available through your personnel representative or call us at Blue Cross & Blue Shield United of Wisconsin.

Service Centers

**Customer service hotline for
State of Wisconsin employees
1-800-755-6400**

Northeastern Service Center
145 South Pioneer Road
Fond du Lac, WI 54935
(920) 923-4141

Southwestern Service Center
500 Hwy 151 East
Platteville, WI 53818
(608) 342-5300

Western Service Center
2270 EastRidge Center
Eau Claire, WI 54701
(715) 836-7737

**Or e-mail us at our web site:
www.bluecrosswisconsin.com**

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Major Medical Deductible & Coinsurance: Deductible is \$250 per person, \$150 for those with Medicare, per calendar year; maximum of two per family. After deductible plan pays 80%, you pay 20% until your out-of-pocket maximum is reached; the maximum is \$1,000 per individual/\$2,000 per family, does not include deductible. Major medical maximum is \$250,000 per lifetime.

Health Benefits	Plan Pays	Limitations
Physician	100%	Non-emergency office calls – deductible and coinsurance. Other services – \$10,000 per illness or injury, then major medical.
Hospital	100%	365 days in semi-private room.
Laboratory and X-rays	100%	None
Mental Health (Combined w/ Alcohol & Drug Abuse)	100%	INPATIENT - 120 days or \$6,300 per calendar year, which ever is less.
<i>In 2003, annual dollar maximums for mental health services are suspended.</i>	90%	OUTPATIENT - Of first \$2,000 per calendar year.
	90%	TRANSITIONAL - Of first \$3,000 per calendar year.
Alcohol and Drug Abuse (Combined with Mental health)	100%	INPATIENT - 30 days or \$6,300 per calendar year, which ever is less.
<i>Maximum for all services is \$7,000 per calendar year, combined.</i>	90%	OUTPATIENT - Of first \$2,000 per calendar year.
	90%	TRANSITIONAL - Of first \$3,000 per calendar year.
Emergency Room	100%	None
Extended Care Facility	100%	120 days per admission less hospital days used. Excludes custodial care.
Vision Care	80%	For illness or disease only. Subject to deductible
Prescribed Medical Services/Supplies	80%	Subject to deductible
Transplants	100%	Kidney, cornea, bone marrow, parathyroid, musculoskeletal. Excludes all services related to non-covered transplants.
Chiropractic Care	80%	Subject to deductible
Ambulance	100%	First \$50 per trip
	80%	Thereafter, subject to deductible
Additional Benefits		
Physical, Speech & Occupational Therapy	80%	Subject to deductible
Home Hospice Care	100%	80 visits per six months
Hearing Aid	0%	Not a covered benefit
Oral Surgery	100%	Same as physician
Infertility Services	0%	Not a covered benefit
Prescription Drugs		Separate PBM administration. Annual out of pocket maximums do not apply.

Standard Plan pays the percent of charge(s) shown above. Charge(s) means usual, customary, and reasonable (UCR) demands for payment for services or other items for which benefits are available, as determined by Blue Cross & Blue Shield United of Wisconsin. In some cases, the amount BCBSUW determines as reasonable may be less than the amount billed by your provider. Those providers not listed in the BCBSUW State Standard provider directory, are not contractually obligated to write off the balance and, as a result, may choose to balance bill the subscriber. Should such a situation arise, 'hold harmless' protections apply. BCBSUW will protect the subscriber against collection agencies and a court of law. For more information on 'hold harmless' or for a list of participating providers in your area, please call a customer representative at the number above or visit our web site. If such a charge dispute arises, contact BCBSUW. If your provider is listed in the Standard Plan directory, charges over UCR will be written off.